

Advising in community pharmacies about maternity care

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Introduction/Background: The success of provision of community pharmacy services depends on internal, as well as on external factors. The reveal of approaches toward advising, the associations (direct and indirect) between frequency of advising and some factors is important to plan the time and resource for investment in present and future.

Aim: This session will focus on the improvement of advising in pharmacies about maternity care.

Topics to be addressed: We will discuss the approaches of advising in maternity care circumstances that pharmacists can use to enhance their activity in maternity health promotion, leading to more complex services in pharmacy practice. This knowledge is useful for pharmacy owners as well, helping to clarify what could be effective and less-effective about their work at their pharmacies. Two presenters – physician and pharmacist will disclose the importance of pharmacist attitude; address the benefits of pharmacy location as social network, pharmacy services and pharmacy – physician interaction from different perspectives based on structural equation modelling. The knowledge which participants take away from this session can be applied to all levels of inter- and intra-professional interactions and improvement of services.

Learning outcomes: Participants will:

Gain a better understanding of different approaches and external factors, associated with more frequent advising in pharmacies during maternity care.

Have better perspective of importance of physician – pharmacist interaction for advising about maternity care.

Practice assessing external strengths and weaknesses of their pharmacies to improve advising about maternity care

Reading suggestions.

[1] Bradley F, Ashcroft DM, Noyce PR. Integration and differentiation: A conceptual model of general practitioner and community pharmacist collaboration. *Res Social Adm Pharm.* **2012**, *8(1)*, 36-46.

[2] McDonald K, Amir LH, Davey MA. Maternal bodies and medicines: a commentary on risk and decision-making of pregnant and breastfeeding women and health professionals. *BMC Public Health* **2011**, *5(11)*, 55.

[3] Liu Y, Doucette WR. Exploring stages of pharmacist–physician collaboration using the model of collaborative working relationship. *J Am Pharm Assoc.* **2011**, *51*, 412-417.

[4] International Pharmaceutical Federation (FIP) FIP reference paper on the effective utilization of pharmacists in improving maternal, newborn and child health (MNCH). **2012**. Available at: www.fip.org.

[6] Grincevičienė Š. Counselling of pregnant women at the pharmacy about rational use of medicinal substances: association with age and education of pharmacy specialists. *Sveikatos mokslai = Health sciences.* **2013**, *23(2)*, 81-84.

[8] Kjos AL, Worley MM, Schommer JC. The social network paradigm and applications in pharmacy. *Res Social Adm Pharm.* **2012**. Available at: <http://dx.doi.org/10.1016/j.sapharm.2012.05.015>.

[9] Schaffar A, Huyghe AS, Bomy H, Duriez P, Ego A, Pierrat V. Breastfeeding: opinion and knowledge of pharmacists. A study in a semi-urban territory. *Arch Pediatr* **2012**, *5(19)*, 476-483.

[10] Rodrigues CR, Dipietro NA. Knowledge of folic acid and counseling practices among Ohio community pharmacists. *Pharm Pract* **2012**, 3(10), 168-172.